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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Application for Docket Number		
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY									OR	OTHER THAN SMALL ENTITY		
L	FOR NUMBER FILED			.ED	NUMBER EXTRA		RATE	FEE	7	DATE	T	
	BASIC FEE (37 CFR 1.16(a))				•			1 5	٦	RATE	FEE	
	OTAL CLAIMS 7 CFR 1.16(c))	min	us 20 =	T.	*	1		OR		\\ \frac{\s_{}}{}		
ĪN	DEPENDENT CLA	NMS					× \$		OR	X \$=	 	
-	(37 CFR 1.16(b)) minus 3 = •					X \$		OR	X \$=			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							=	<u> </u>	OR	+ \$=		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		OR	TOTAL		
	C	CLAIMS A	AS AMEND	ED – P.	ART II						-	
	10/	(Colum		(Column 2)	(Column 3)	SMALI	ENTITY	OR		R THAN ENTITY	
AMENDMENT A		CLAI REMAI AFT AMEND	NING ER	PRI	HIGHEST NUMBER EVIOUSLY AID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
Ž	Total (37 CFR 1.16(c))		2 Min	ıs *•	40	=	× \$ 25 =		OR	x \$ 50 =	FEE	
Ã	Independent (37 CFR 1.16(b))	1	7 Mini	ıs	6	= /	x \$ 100=	100	OR.	x \$ 200 =		
¥	FIRST PRESEN	TATION OF N	MULTIPLE DEPE	NDENT CI	LAIM (37 CF	FR 1.16(d))	+: 180 =		1			
						· · · · · · · · · · · · · · · · · · ·	TOTAL	100	OR 0	+ \$ 360=		
		(0.4	4)				ADD'L FEE	1000	d or	ADD'L FEE		
AMENDMENT B		(Column CLAIN REMAIN AFTE AMENDA	MS NING R	HI NI PRE	GHEST UMBER VIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
	Total (37 CFR 1.16(c))		Minu			=	x s 25 =	766			FEE	
ä	Independent (37 CFR 1.16(b))	•	Minus	1		=	x s 100 =	<u> </u>	OR	× \$ <u>50</u> =		
ξ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$ 180 =		OR	× \$ <u>&</u> & =		
							TOTAL ADD'L FEE		OR (+ <u>360</u> = TOTAL ADD'L FEE	· ·	
		(Column	1)	(Co	olumn 2)	(Column 3)				_		
AMENDMENT C		CLAIM REMAIN AFTEI AMENDM	ING R	PRE	GHEST IMBER VIOUSLY ID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1.16(c))	•	Minus	**		2 ·	x s 25 =		OR	× \$ 50 =	ree	
	independent (37 CFR 1.16(b))	•	Minus	***		=	x \$ 100 =		Ī	x \$ 200=		
⋛	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+:180=					
							TOTAL		OR L	+ \$360 =		
•	If the entry in co If the "Highest N	lumn 1 is le	ss than the en	ry in colu	mn 2, write	"0" in column 3	ADD'L FEE		OR	ADD'L FEE		
•••	If the "Highest N	umber Prev	iously Paid Fo	' IN THIS	SPACE IS	less than 3 ent	mer∠U. er"3"				1	

"If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.